



**QUEENSLAND ORTHOTIC LAB**  
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# PRESCRIPTION ORDER FORM:

*Richie* AeroSpring Brace Systems

Date: \_\_\_\_\_

Patient Name: \_\_\_\_\_

Age: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Shoe Size: \_\_\_\_\_

Carbon Fibre AFO for:  Left  Right

## SELECT THE BRACE SYSTEM:

- AeroSpring Achilles Offloading System  
Carbon Fibre AFO, one pair custom foot orthosis, one pair of 20mm graduated heel wedges in 10mm increments.
- AeroSpring Plantar Fascia Offloading System  
Carbon Fibre AFO, one pair custom foot orthosis, one pair of 10mm graduated heel wedges.
- AeroSpring Midfoot Offloading System  
Carbon Fibre AFO, one pair custom foot orthosis, one pair of 10mm graduated heel wedges.
- AeroSpring Dropfoot Stability System  
Carbon Fibre AFO, one pair custom foot orthosis. No heel wedges are recommended for this system.

Special Notes: